

DATE: Wednesday, February 23, 2017
TO: CGA Appropriations Committee
FROM: Sheryl S. McNamee, Esq., Director of Public Affairs,
Clifford Beers Clinic, New Haven, CT
RE: H.B. NO. 7027, AN ACT CONCERNING THE STATE BUDGET FOR THE BIENNium
ENDING JUNE THIRTIETH 2019, AND MAKING APPROPRIATIONS THEREFOR

I'd first like to thank the Chairs of the Appropriations Committee – Senator Osten, Senator Formica, Representative Walker, and Representative Ziobron – and all the distinguished members of the Committee for the opportunity to testify regarding the above referenced legislation.

I am here on behalf of Clifford Beers Clinic, a child and family mental health clinic in New Haven founded over a century ago by Clifford Whittingham Beers. Beers is largely credited with creating outpatient therapy – he reasoned that it made far more sense to keep those suffering with their family and friends while they sought assistance a few hours a week from a nearby provider. This was in stark contrast to the turn-of-the-century practice of shipping the afflicted to an insane asylum (something that, circa 1913, came with a great risk for cruel and inhumane mistreatment).

Beers was a pioneer, and his spirit has permeated 100+ years of programming. Our work is often referred to as groundbreaking or innovative, but **our work – which by objective measures and assessments is proven to foster and healing and well-being for children and their families – does not happen without sustained funding from the State of Connecticut.** We are well aware of the budget crisis but believe we can help address it with your support.

In particular, in innovative fashion CBC recently designed a behavioral health program for children and their families facing autism spectrum disorder and related intellectual disabilities. The program is true to our model of care which envelops not just the child but the entire family, and services include care coordination, social skills groups for children and siblings, parent support groups, nursing care, and psychiatric services. It is a truly multi-disciplinary approach, and we are working to add services including education and legal advocacy, occupational therapy, physical therapy, speech and language services, nutrition support, in-home behavioral services, and anything else that will foster wellness and health.

While this comes at a cost, the cost is far less than the current model of care that rests largely in residential care. A 2014 study commissioned by the advocacy group Autism Speaks found that the lifetime cost of caring for an autistic individual ran between \$1.4 million and \$2.4 million. That same study suggests that the cost – largely borne of residential care – might be

reduced if we addressed the collective failure to provide options that integrate these individuals into their communities.

And this is where CBC comes in. Key to reducing lifespan costs is better access to quality early intervention. There is strong evidence to indicate that quality early intervention will improve function and have lasting, long-term benefits with the potential to improve lives while reducing lifetime costs. With the ASD/IDD population showing signs of growth (a 2015 report from the National Center for Health Statistics estimates ASD prevalence to be 22.4 per 1,000 children (ages 3 to 17) and indicates a trend toward an increase in that population from 1997 through 2015), quality care for children and families that yields improved quality of life at cost savings is more important than ever.

The State of Connecticut has worked hard to meet the needs of ASD/IDD children and families, but it hasn't met the mark. Fourteen months ago, DDS indicated there were 785 individuals on the DDS Division of Autism Spectrum Disorder waiting list for services, and nearly 70% of them were age 21 or younger. It is not the time, then, to cut any funding for these critical services – funding that will yield long-term savings and provide a pathway toward meaningful community integration. The Governor's budget inadequately provides for employment opportunities and day services, and **the proposed cut of \$3.7 million in each fiscal year from the behavioral services program would reduce critical services offered to children with complex needs who are eligible for DDS support; similarly, the proposed cut of \$370,000 in each fiscal year to the Family Support Grant would reduce important support for families of people with intellectual and developmental disabilities.**

These people are some of our state's most vulnerable: most at risk. In addition to sustaining funding to better meet their needs, the Committee is asked to expand where possible opportunities to convert state-run services to community-based providers such as Clifford Beers Clinic. The proposal before you includes conversion of certain mental health services, but there exist additional places for the State to shift more services into the community to save money while simultaneously improving services – and quality of life – for everyone.

Your thoughtfulness regarding the health and well-being of children and families facing ASD and related intellectual disabilities is greatly appreciated. On behalf of those families we ask that you take into consideration the above remarks as you consider Governor's proposed budget and H.B. 7027.